

Mental Health System and Services

1. We support the bipartisan effort to redesign the mental health system with the focus on the needs of individuals, families, and communities who seek assistance, not bureaucrats who are protecting turf.
 2. We support the appropriation of \$25 million to the risk pool to eliminate MH waiting lists.
 3. We advocate all disability services* along with primary care to be located within the same area of state government --utilizing the public health model --for holistic treatment --providing a continuum of care --a single system for funding and services to eliminate duplication and inefficiencies
- *Including mental health, intellectual disabilities, developmental disabilities, brain injury and substance abuse because of the prevalence of co-occurring conditions.
4. We advocate for the redesigned disability health system to be --managed regionally --oversight and standards at the state level --with a robust core set of community based services --with adequate funding

TREATMENT WORKS. Individuals with severe mental illnesses can and should be treated - just as we treat individuals suffering from other medical issues. VIOLENCE IS LINKED TO UNTREATED SEVERE MENTAL ILLNESS. Individuals with severe mental illnesses are no more violent than the general population – so long as they are being treated. STATES LAWS NEED TO PERMIT INTERVENTION BEST DANGEROUS BEHAVIOR OCCURS.

Project Iowa – Iowa Opportunities for Workforce Advancement

An AMOS Workforce & Economic Development Initiative

The Plan

- Increase access to career track living wage jobs over 3 years for 180 chronically under-employed and unemployed Iowans through public-private skills training and community-based support/mentoring.
- Seeking start up funding of \$350,000
- Initiate Project Iowa training in August 2011
- 3-Year Funding of \$1.4 million to train and place 180 Iowans
- Utilize existing training resources & agencies in Iowa.
- 4. Counselor/tutor assigned to each trainee with access to known community mentors (pastors, parents, coaches, etc) to assure timely and complete participation by trainees.
- 5. Accelerated remediation education provided as needed to all candidates.
- **Support Iowa Workforce Development funding of Project Iowa.**
- **Work with AMOS to find additional resources to fund three year pilot initiative of Project Iowa.**
- 6. Weekly evening class of trainees to share, learn, inspire and re-commit to success of each other held by trained counseling staff of Project Iowa. VIP Class – Vision, Initiative & Perseverance

Background for MH recommendations

AMOS Member Institutions

The first time the Surgeon General addressed mental health was in 1999 – barely 10 years ago. In his 1999 report, the Surgeon General said: “Our society no longer can afford to view mental health as separate and unequal to general health. It is a misperception that mental health or mental illness is unrelated to physical health or physical illness. In fact, the two are inseparable.”

Substance Abuse and Mental Health Services Administration (SAMHSA) Draft Description of a Modern Addictions and Mental Health Service System
 ... Integration of primary care and behavioral health is essential.
 ... The vision for a good and modern mental health and addiction system is grounded in a public health model.
 ... The integration of primary care, mental health and addiction services must be an integral part of the vision.
 ... Providing integrated primary care and behavioral health services will allow for cost effective management of co-morbid conditions.
 ... Coordination, communication, and linkage with primary care can no longer be optional given the prevalence of co-morbid health, mental health and substance use disorders.

The Shortage of Public Hospital Beds for Mentally Ill Persons - A Report of the Treatment Advocacy Center
Excerpt: The states with the fewest beds were Nevada (5.1) per 100,000, Arizona (5.9), Arkansas (6.7), Iowa (8.1), Vermont (8.9), and Michigan (9.9)
http://www.treatmentadvocacycenter.org/storage/tac/documents/the_shortage_of_publichospital_beds.pdf

March 2006 IDPH Mental Health Workforce report
Excerpt: The Health Resources Services Administration (HRSA) data ranks Iowa 47th among states in psychiatrists per 100,000 population and 46th for psychologists.
http://www.idph.state.ia.us/hpcdp/common/pdf/workforce/mentalhealth_0306.pdf

For community based services array -See State of Georgia settlement with Dept. of Justice
<http://www.namiqa.org/DOJ/index.htm>



AMOS – Creating a Community Where All Can Succeed

A Mid Iowa Organizing Strategy
FY 2011 Legislative Priorities

Quality Mental Health Care for All
&
Project IOWA – 21st Century Workforce Training & Economic Development Strategy